**1. Topic of assessment**

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| **EIA title:**  | Joint Emotional Wellbeing and Mental Health Commissioning Strategy for children and young people  |

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| --- | --- |
| **EIA author:** | Karina Ajayi, Commissioner, Children’s Commissioning Team |

**2. Approval**

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| --- | --- | --- |
|  | **Name** | **Date approved** |
| Approved by[[1]](#footnote-1) | Ian Banner Sheila JonesSarah Parker  |  |

## 3. Quality control

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| **Version number**  | 1 | **EIA completed** |  |
| **Date saved** | 11/7/2013 | **EIA published** |  |

#### 4. EIA team

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| --- | --- | --- | --- |
| **Name** | **Job title****(if applicable)** | Organisation | **Role** |
| Sheila Jones | Head of Countywide Services | SCC, CSF  | CAMHS Commissioning member  |
| Ian Banner  | Head of Children Services Commissioning  | SCC, CSF | CAMHS Commissioning Group Chair |
| Angela Sargeant | CAMHS Development Manager | SCC,CSF | Pooled Budget Manager |
| Diane McCormack  | Head of Complex Needs and Mental Health  | Guildford and Waverly CCG | CAMHS Commissioning member  |
| Kelly Morris | Public Health Principal | SCC,CSF | CAMHS Commissioning member |
| Karina Ajayi | Commissioner | SCC,CSF | Commissioner  |

#### 5. Explaining the matter being assessed

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| --- | --- |
| **What policy, function or service is being introduced or reviewed?**  | This is an equality impact assessment of the Surrey Child and Adolescent Mental Health Commissioning strategy. The strategy outlines six key objectives, based upon shared commissioning principles to help inform what services will need to be commissioned or decommissioned over the coming four years. The strategy has been developed at a time of economic challenge and it is essential that the commissioning objectives are acted upon, and that all services current and future are challenged to ensure maximum effectiveness and value for money. The strategy is relevant to *all commissioned* services that contribute to the emotional wellbeing and mental health care of children and young people.This definition includes;* Universal services – promoting emotional well-being, including GPs and schools
* Targeted services – providing early intervention for vulnerable young people, these services primary function may not necessarily be mental health such as youth workers
* Specialist services – providing high quality mental health provision.

The strategy outlines what we know about the needs of children and young people with mental health needs. It describes what we do and intend to do to support them. The commissioning strategy is also informed by informed by the Surrey Health and Wellbeing strategy; Surrey’s Children and Young People’s strategy 2012-2017 and *No Health without Mental Health*  national strategy. |
| **What proposals are you assessing?**  | The strategy sets out the agreed direction of travel for the Clinical Commissioning Groups in Surrey and Surrey County Council. The implementation of this strategy is likely to lead to changes in the following:* Review of existing services/ functions and remit;
* Changes to existing services via service remodelling or decommissioning
* Commissioning and procurement of new services
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| **Who is affected by the proposals outlined above?** | In the implementation of the strategy, children, young people and their families who currently access mental health services will be affected. Other stakeholders affected would be Council staff and staff employed in public, private and voluntary sector organisations delivering emotional wellbeing and mental health services. |

**6. Sources of information**

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| **Engagement carried out**  |
| Prior to the drafting of the strategy, stakeholder events have been undertaken with service users and their families to identity emotional wellbeing and mental health needs, alongside stakeholder events with service providers; and practitioners in Youth Support Services; Education, school confederations. |
|  **Data used** |
| In addition to the above quantitative data from the following have also been used to inform the commissioning strategy.* [Surrey-i](http://www.surreyi.gov.uk/MainMenu.aspx?cookieCheck=true&JScript=1), our local data and information portal
* Previous CAMHS needs assessment 2009
* Joint Strategic Needs Assessment (JSNA) 2010 mental health chapter
* CAMHS 1 in 10 needs assessment (2011)
* Annual report for Parent Infant Mental Health, Sexual Trauma and Recovery Service and Targeted approach to Mental Health in Schools
* CAMHS Community Nurses audit
* Surrey and Borders Partnership Board NHS Foundation Trust performance report
* National research
* NICE – National Institute for Clinical Excellence
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**7. Impact of the new/amended policy, service or function**

In the tables below we have brought together our equality analysis and set out how the new/amended policy, service or function will affect children, young people and their families with emotional wellbeing and mental health needs and staff. This analysis considered how the strategy will:

* advance equal opportunities;
* eliminate discrimination; and
* foster good relations between people that share protected characteristics and those that do not.

Our analysis and evidence gathered was proportionate to the likely scale of impact for children, young people and their families with emotional wellbeing and mental health needs and staffsharing protected characteristics.

Analysis was based on the information gathered from the data and engagement activities listed in section six. The strategy and this draft equality impact assessment will be consulted on and the feedback of the consultation will be taken into account in finalising the EIA and subsequent decisions arising from the implementation of the strategy. Specific details and comments that are relevant for protected characteristics are included in the EIA.

* + We have listed every possible way the strategy might conceivably impact on children, young people and their families.
	+ Our analysis did not identify that the proposal needs to be amended in order to deal with the equalities implications identified in this EIA.
	+ Our analysis identified mitigating actions or ongoing monitoring required when the consultation is completed, and decision on the options is agreed.
	+ We consider that there will be no impact on particular protected characteristics for the reasons stated.

Annex 1 contains detailed guidance about the issues we considered when assessing impact of the joint commissioning strategy.

**7a. Impact of the proposals on residents and service users with protected characteristics**

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| --- | --- | --- | --- |
| **Protected characteristic[[2]](#footnote-2)** | Potential positive impacts  | Potential negative impacts | Evidence |
| **Age** | The strategy seeks to address the mental health needs of service users from pre-birth to adolescence, whilst ensuring support for parents/carers as well as ensuring age appropriate interventions  | None | Half of all lifetime mental health problems emerge before the age of 14. Early detection and treatment of mental ill health can dramatically reduce the duration, severity and loss of quality life associated with mental ill health *(No Health Without Mental Health: HM Government 2011)*  |
| **Disability** | One of the six objectives is to ensure services are delivered in a non-discriminatory way and that no individual or group with protected characteristics is prevented from accessing services  | None | The prevalence of mental disorders was greater among children In households in which someone received disability benefit (24%), compared with those that received no disability benefit (8%). It is estimated 40% of children with Learning Disability have mental health problems. (Surrey i)  |
| **Gender reassignment** | None  | None |  |
| **Pregnancy and maternity** | Strategy seeks to ensure provision is in place across the life course from pre birth to late adolescence | None | Pregnancy and Maternity and early years - promoting maternal mental health and reducing depression and improving attachment (NICE) |
| **Race** | The strategy seeks to ensure timely interventions for harder to reach communities e.g. Gypsy & Roma Traveller or Black & Minority Ethnic communities by providing culturally sensitive services | None | Gypsy and Traveller children mental health needs may be hidden from the system due to difficulty in accessing and engaging with services. It is estimated that there are 3000 Gypsy and Traveller children in Surrey (Surrey i) |
| **Religion and belief** | None | None |  |
| **Sex** | None | None |  |
| **Sexual orientation** | None  | None |  |
| **Marriage and civil partnerships** | None  | None |  |

**7b. Impact of the proposals on staff with protected characteristics**

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| --- | --- | --- | --- |
| **Protected characteristic** | Potential positive impacts  | Potential negative impacts | Evidence |
| **Age** | None | None |  |
| **Disability** | None | None |  |
| **Gender reassignment** | None | None |  |
| **Pregnancy and maternity** | None | None |  |
| **Race** | None | None |  |
| **Religion and belief** | None | None |  |
| **Sex** | None | None |  |
| **Sexual orientation** | None | None |  |
| **Marriage and civil partnerships** | None | None |  |

1. [↑](#footnote-ref-1)
2. More information on the definitions of these groups can be found [here](http://www.equalityhumanrights.com/advice-and-guidance/new-equality-act-guidance/protected-characteristics-definitions/). [↑](#footnote-ref-2)